



## New Jersey Early Intervention System (NJEIS)

### Family Cost Participation Policy and Procedures

#### ADMINISTERING ENTITY

The Department of Health and Senior Services (DHSS), as the Governor appointed lead agency, is responsible for the development and implementation of a state early intervention system for infants and toddlers who have disabilities or developmental delays and their families. DHSS has established procedures to implement the New Jersey (NJ) Early Intervention System Family Cost Participation Policy in accordance with Part C of the Individuals with Disabilities Education Act. The Service Coordinator for the family is responsible for the collection of information and verification of income.

#### NJEIS FAMILY COST PARTICIPATION POLICY

- Early intervention services, provided to eligible infants and toddlers and their families, shall be financed through multiple funding sources. Sources which may be available to finance individualized services, as appropriate, may include, but are not limited to, the following:
  - Title XIX of the Social Security Act (Medicaid).
  - Third party payers. Third party payers, such as health insurance companies, may be billed for the costs of appropriate early intervention services with informed, written parental consent.
  - Any medical program administered by the Secretary of the United States Department of Defense.
  - Part C, Individual with Disabilities Education Act (IDEA).
  - State appropriation, Early Childhood Intervention Program
  - Cost participation by the family of an eligible child that receives direct early intervention services through the implementation of an Individualized Family Service Plan (IFSP).
- In accordance with these policy and procedures, DHSS-EIS shall establish and implement family cost participation procedures for charges and fees for early intervention services provided under an IFSP by EIS approved early intervention program providers.
- DHSS may exempt or reduce a required family cost participation payment if:
  - An application to adjust income for extraordinary expenses is submitted by the family and approved by DHSS; or
  - DHSS-EIS receives payment from a family's health care insurance carrier.
- A parent who does not provide the financial information for the DHSS-EIS to be able to determine the family cost participation payment amount shall pay the full cost of service provided by the NJEIS.
- The family's cost participation amount shall be reviewed by the service coordinator for one (1) or both of the following:
  - Annually, or
  - Within thirty (30) days after the parent reports an increase or reduction in income.
- The family cost share payments received by the DHSS-EIS will be used to fund the early intervention system.

<p><b>DETERMINATION OF FAMILY COST PARTICIPATION</b></p>	<p>The Early Intervention System (EIS) family cost share is a progressive monthly fee based upon family size and adjusted gross income along the federal poverty level guidelines.</p> <p>Families with an annual adjusted gross income at or above 350% of the federal poverty level will be required to share in the costs of EIS services provided.</p> <p>The EIS cost share system is similar in structure to the federal income tax progression and, like the federal tax structure, a larger percentage of a family's adjusted gross income is assessed in a progressive manner as the family's adjusted gross income increases.</p> <p>Adjusted gross incomes at 350% of the federal poverty level will start at a \$10 per month base fee, with progressive increases based on adjusted gross income.</p> <p>Adjusted gross incomes above 1,050% of the federal poverty level will be assessed an additional \$2 per month per additional \$1,000 of adjusted gross income.</p> <p>A Family Cost Share Table with \$500 income increments will be provided to identify the family's monthly cost share based on family size and adjusted gross income.</p> <p>The family's actual monthly cost will either be the family cost share payment determined by the family cost participation policies and procedures or the actual cost of the service, whichever is less.</p> <p>The family cost share payment established for the family will be the same regardless of:</p> <ul style="list-style-type: none"> <li>• Whether one or more children receive services; or</li> <li>• The number of EIP provider agencies from which services are received.</li> </ul>
<p><b>FAMILY RESPONSIBILITIES</b></p>	<p><b>The family is responsible for the following:</b></p> <ul style="list-style-type: none"> <li>• Requesting assistance from their service coordinator in answering questions or providing explanations of any information they do not understand regarding family cost participation policy/procedures and their family cost share payment.</li> <li>• Providing financial information in order for a family cost share to be determined by the early intervention system.</li> <li>• Paying for actual cost of services if they do not provide the early intervention system with required financial information to determine a monthly family cost share payment.</li> <li>• Informing their service coordinator when there are changes in their financial status.</li> <li>• Participating in an annual family cost participation agreement re-evaluation to determine family cost share responsibility.</li> </ul>
<p><b>SERVICE COORDINATOR RESPONSIBILITIES</b></p> <p>Special Child Health Services-Case Management Unit (SCHS-CMU)</p>	<p><b>The Service Coordinator is responsible for the following:</b></p> <ul style="list-style-type: none"> <li>• During the intake process, the Service Coordinator must explain the family's rights and financial responsibilities within the NJEIS including: <ul style="list-style-type: none"> <li>▪ Use of insurance;</li> <li>▪ How extraordinary expenses relate to the determination of family cost participation;</li> <li>▪ What functions or services must be provided at public expense; and</li> <li>▪ How IFSPs are developed without regard to their ability to pay.</li> </ul> </li> <li>• Once eligibility for the child has been established, the Service Coordinator is responsible to further explain the NJ Early Intervention System family cost participation policy and procedures, inform the family of documentation needed and, as appropriate, collect required income and insurance information from the family.</li> <li>• Inform and assist the family as needed in completing an EIS Application for Income Adjustment and, as appropriate, Catastrophic Illness in Children Relief Fund Program.</li> </ul>

<p><b>SERVICE COORDINATOR RESPONSIBILITIES</b></p> <p><b>(Continued)</b></p> <p>Special Child Health Services-Case Management Unit (SCHS-CMU)</p>	<ul style="list-style-type: none"> <li>• Assist the family in identifying the family's monthly cost share based on family size and adjusted gross income using the EIS Family Cost Share Table.</li> <li>• Obtain a parent signature on a Family Cost Participation Form.</li> <li>• Data entry of the family income and family size.</li> <li>• Maintenance of the completed NJEIS Family Cost Participation Form in the child's early intervention service coordination file located at the county SCHS-CMU.</li> <li>• Annually, the Service Coordinator is responsible to explain the family's rights and responsibilities within the NJEIS and collect, with family consent, updated income and insurance information, as required on the Family Cost Participation Form. Families are held responsible and requested to attest to the accuracy of all information supplied.</li> <li>• Within 30 days of a request/consent from a family to review their family cost share, the service coordinator must review the documentation of the family's income, changes in income and/or assist with an EIS Application for Income Adjustment. Documentation of the review including the completion of any necessary forms, and supporting documentation, must be maintained with the child's service coordination file.</li> <li>• Ensuring that families are informed of their right to submit to DHSS an EIS Application for Income Adjustment or request for administrative review of adjusted gross income and/or pursue procedural safeguards dispute resolution options.</li> <li>• Ensuring that IFSPs are developed without regard to the family's ability to pay.</li> </ul>
<p><b>SCHS-CMU RESPONSIBILITIES</b></p>	<p><b>The SCHS-CMU is responsible for the following:</b></p> <ul style="list-style-type: none"> <li>• Data entry of financial and insurance information collected through intake, family assessment and completion of the Family Cost Participation Form.</li> <li>• Ensuring that the service coordinator accurately completes the Family Cost Participation Form, reviews and verifies supporting documentation and maintains appropriate documents in the child's early intervention service coordination file located at the SCHS-CMU in accordance with federal and state requirements.</li> <li>• Ensuring that IFSPs are maintained, updated, and submitted to the REIC in a timely manner.</li> </ul>
<p><b>CENTRAL MANAGEMENT OFFICE (CMO) RESPONSIBILITIES</b></p>	<p><b>The Central Management Office (CMO) is responsible for the following:</b></p> <ul style="list-style-type: none"> <li>• Calculating the monthly cost of services for each family based on services provided.</li> <li>• Mailing the Explanation of Benefits (EOB)/billing information to the family that outlines the services provided and payment information.</li> <li>• Processing all revenue received through family cost participation.</li> </ul>
<p><b>EARLY INTERVENTION PROGRAM PROVIDER RESPONSIBILITIES</b></p>	<p><b>The Early Intervention Program (EIP) is responsible for the following:</b></p> <ul style="list-style-type: none"> <li>• Ensuring that early intervention services are provided in accordance with the IFSP and the terms and conditions of the Letter of Agreement with DHSS.</li> <li>• Submitting complete, accurate and parent verified Service Encounter Verification Forms and billing summaries on all children receiving services within 60 days of service delivery.</li> <li>• Billing for early intervention services rendered consistent with the current and agreed upon Individualized Family Service Plan developed in accordance with NJ policy and procedures and signed by the parent.</li> <li>• Understanding that invoices will not be processed when services are inconsistent with the respective authorized (signed and agreed upon) IFSP and/or when credentials and/or licenses of the practitioner(s) are outdated or otherwise inconsistent with EIS personnel standards and/or state certification and licensing regulations or guidelines.</li> <li>• Maintaining original copies of Service Encounter Verification Forms at the early intervention program agency.</li> </ul>

<p><b>ADJUSTED GROSS INCOME DETERMINATION</b></p>	<p><b>Members of the child's family/relatives living with and/or contributing to the family income must present the following documents for verification:</b></p> <ol style="list-style-type: none"> <li>1. The most recently filed federal income tax form with all applicable attachments. <ul style="list-style-type: none"> <li>▪ The most current 1040; and, as appropriate,</li> <li>▪ Business Schedule C for self-employment verification;</li> </ul> </li> <li>2. Documentation of child support received or paid; and/or</li> <li>3. Pay stubs from the three most recent consecutive pay periods.</li> </ol> <p><b>Notes:</b></p> <ul style="list-style-type: none"> <li>• If the most current federal tax form has not been filed, current wage and earnings statements (i.e. W-2, 1099) and IRS 1040 extension request, or a written statement from the employer regarding salary/wages must be presented.</li> <li>• All income information must be verified annually or within thirty (30) days after the family reports a change in income.</li> <li>• Child support received must be included as income. However, a parent not living in the home and not claiming the child as a dependent does not need to provide personal income information.</li> <li>• Child Support paid to benefit a child that does not live with the parent may be deducted from income. The child must not be reported in family size</li> <li>• Stepparent: If the stepparent filed jointly and claimed the child as a dependent the stepparent's income is included and the stepparent is included in family size. If the stepparent files separately and does not claim the child as a dependent, the stepparent's income does not have to be considered and if income is not included, the stepparent is excluded from the family size.</li> <li>• If the eligible child resides with a caretaker that is a relative other than the parent such as an aunt or grandparent, the income of this relative is considered in the gross income determination only if the child is claimed as a dependent or if they are under legal obligation to support the child.</li> <li>• Child and/or family benefits received from the Social Security Administration (SSA) are calculated into family income.</li> <li>• A family may request an administrative review by DHSS if asking for special consideration of their financial status. Families may also request mediation, a due process hearing, or resolution of an administrative complaint through the Part C procedures. Additional information is referenced in the Administrative Review section of this document.</li> </ul>
<p><b>FAMILY SIZE</b></p>	<p>The number of family members (family size) to be considered in the eligibility determination is established by counting the dependent child, the child's parent(s), and the child's siblings with whom the dependent child lives. All natural, adoptive, or half-siblings who meet the definition of dependent child must be included in the family group. The income rules require the consideration of the income of the dependent child, the dependent child's siblings, and dependent child's parents.</p> <p>If a caretaker relative, either by blood or by law, lives with the child and exercises parental responsibility (care and control) in the absence of the child's parents, the caretaker is included in the calculation of family size. Examples include but are not limited to Grandparents, Aunts, Uncles, Cousins, Stepparent and Adult Siblings.</p> <p>A child, who resides in a foster home, is considered a family of one and would not be considered for cost participation.</p>

<p><b>ADJUSTMENT(S) TO INCOME FOR EXTRAORDINARY EXPENSES</b></p>	<p><b>Families may submit to the Department of Health and Senior Services (DHSS), Early Intervention System, an EIS Application to Adjust Income for extraordinary expenses. The service coordinator is responsible for assisting the family with preparing and submitting the Application.</b></p> <ul style="list-style-type: none"> <li>• Extraordinary expenses are defined as average monthly or yearly unreimbursed (“out of pocket”) expenses that are related specifically to the eligible child’s disability or an immediate family member with a disability or long term health issue. Deductions might include specific purchases, expenses, modifications, and alterations that family members have made within the previous month or year to accommodate the extended/additional needs of the eligible child or family member. Extenuating circumstances may include unexpected events that affect the family’s financial situation.</li> <li>• Extraordinary expenses cannot include out of pocket expenses for anticipated services or any expenses for which other funding resources have been requested to assist in paying for the same products and services. Extraordinary or extenuating circumstances must be supported by written documentation.</li> <li>• Outstanding, unreimbursed medical expenses for the early intervention eligible child or family member with a disability or extended illness must be greater than 5% of the families adjusted gross income and less than the amount that would allow a family to qualify for Catastrophic Illness in Children Relief Fund Program (10% of income&lt;\$100,000 and 15% of income&gt;\$100,000.</li> <li>• Additional information on extraordinary expenses are provided under the Application to Adjust Income process that requires review and approval by DHSS, EIS</li> <li>• If, at any time, a family experiences a significant change in medical or personal care needs expenses or have other extraordinary expenses, they may request a re-evaluation of their family cost participation.</li> </ul>
<p><b>UTILIZATION OF INSURANCE</b></p>	<p>Use of insurance may apply toward a family’s cost participation with parent consent. If the insurance payment is not received due to limited insurance policy coverage, the family cost share payment or actual cost of services, which ever is less, will be billed to the family. If the insurance payment/coverage is not received by fault of the lead agency or Central Management Office (CMO), the payment that would have been covered by insurance would be applied toward the family cost share amount.</p> <p>Families will be informed of, encouraged and, as requested, assisted by service coordination to apply for benefits, including Medicaid and NJ Family Care (state children’s health insurance program) for which their child may be eligible.</p> <p>Families covered by a third party (such as Blue Cross/Blue Shield, commercial health insurance or governmental agencies) have the option of using their insurance toward the cost of early intervention direct services. The family’s insurance co-payment, deductible and cost of services covered by insurance, all contribute to the family’s cost share payment for services identified as needed on the IFSP. If a family chooses to use their insurance, but also qualifies for services at public expense, Part C funds may be used to cover the family’s insurance co-payment.</p> <p>Families will be informed of their right to provide or not provide consent to use private insurance to cover the cost of early intervention services.</p>

<p><b>ESTABLISHMENT OF FAMILY COST SHARE PAYMENT AMOUNT</b></p>	<p><b>A Federal Poverty Level (FPL) Chart and Family Cost Share Tables will be utilized in determining the family cost share payment. The determination takes into consideration:</b></p> <ul style="list-style-type: none"> <li>▪ The family's adjusted gross income minus any DHSS-EIS approved allowable extraordinary expenses, and</li> <li>▪ The family size.</li> </ul> <ul style="list-style-type: none"> <li>• Families under the 350% Federal Poverty Level (<i>FPL</i>) are exempt from cost share payment. Incomes calculated at or above 350% have sliding scale cost share payment based on the income level and family size.</li> <li>• Families, who choose to decline to provide financial information for the determination of the cost share payment amount, will be billed the actual cost of direct early intervention services identified as needed in the IFSP.</li> <li>• Family cost share payment amounts will be identified on the NJEIS Family Cost Participation Form.</li> <li>• Families may submit an Application for Income Adjustment with required documentation</li> <li>• Families who disagree with the cost share payment may: <ul style="list-style-type: none"> <li>▪ Request an administrative review by the lead agency (DHSS); or</li> <li>▪ Request procedural safeguards dispute resolution options including mediation, a due process hearing, or administrative complaint. Additional information is provided in the Administrative Review Section of this document.</li> </ul> </li> </ul>
<p><b>ASSESSMENT OF FAMILY COST SHARE PAYMENT</b></p>	<p>Family cost share payments are based on delivery of services that are authorized for the eligible child and family in the IFSP. The family will be billed the monthly cost share payment amount or actual service cost, the lesser of the two, up to the monthly cost share.</p> <ul style="list-style-type: none"> <li>• Family cost share payments may not be charged for early intervention functions or services required to be provided at public expense to eligible infants and their families by federal or state regulation. The functions and services that must be provided at public expense are: <ol style="list-style-type: none"> <li>1. Child Find;</li> <li>2. Evaluation and Assessment;</li> <li>3. Development of an Individualized Family Service Plan;</li> <li>4. Service Coordination; and</li> <li>5. Procedural Safeguards</li> </ol> </li> <li>• A family cost share payment will be applied to the following early intervention services: <ol style="list-style-type: none"> <li>1. Assistive Technology Services/devices;</li> <li>2. Audiology Services;</li> <li>3. Developmental Intervention;</li> <li>4. Family Training, Counseling, &amp; Home Visits;</li> <li>5. Health Services;</li> <li>6. Nursing Services;</li> <li>7. Nutrition Services;</li> <li>8. Occupational Therapy;</li> <li>9. Physical Therapy;</li> <li>10. Psychological Services (Therapy);</li> <li>11. Social Work Services;</li> <li>12. Speech and Language Therapy; and</li> <li>13. Vision Services;</li> <li>14. Other early intervention services, other than translation services.</li> </ol> </li> </ul>

<b>SOURCE OF PAYMENT</b>	<p>The family may meet their financial cost in the following ways:</p> <ul style="list-style-type: none"> <li>• Payment of the monthly family cost share amount.</li> <li>• Reimbursement of early intervention services through access to the family's private insurance.</li> <li>• Family pay for actual cost of services.</li> </ul> <p>Families may select their preferred method of payment once the cost share payment amount has been determined and the family is fully informed of the rights and opportunities within the program. The family will indicate the method of payment on the NJEIS Family Cost Participation Form.</p> <p>Federal and State regulations require that any and all other resources be utilized toward the cost of services. Part C funds must not be used to replace other sources of payment, including other governmental agencies. Part C funds are to be used as payor of last resort.</p>
<b>BILLING PROCESS</b>	<p><b>The DHSS or designated Central Management Office (CMO) is responsible to notify the parents of the cost share payment amount due and to collect all revenue generated by this process.</b></p> <p>An Explanation of Benefits (EOB) document will be sent to the parents and will include the cost share payment and any arrearage due. All payments must be made directly to the DHSS or designated CMO billing agent within 30 days of receipt. Fees will remain in effect for twelve (12) months (coinciding with the IFSP date) unless a review of the financial information is requested and a change in cost share payment is determined.</p> <p>Families that are required to pay a cost share payment must do so, unless, they can document extenuating circumstances. If so, these circumstances must be considered and approved on a case by case basis through the DHSS-EIS administrative review process.</p>
<b>FAILURE TO PAY PROCEDURE</b>	<p><b>The following timeline will be implemented for payment of services:</b></p> <ul style="list-style-type: none"> <li>• A family will have thirty (30) days to pay their cost share payment upon receipt of the Explanation of Benefit/Billing document.</li> <li>• Each month, the Explanation of Benefit/Billing document will include the total amount due. If the prior month's payment is not received prior to the generation of the current month's form, the receipt of payment may not be included on the form. However, the parent will not be considered past due in payment.</li> <li>• If payment is not received within thirty (30) calendar days of billing, the CMO will generate a delinquent notice to the family.</li> <li>• If payment is not received after another thirty (30) calendar days, a second and final notice of non-payment will be mailed stating that if payment is not received in fourteen (14) calendar days, services will be suspended. The notice will include a date of suspension.</li> <li>• The CMO will inform DHSS-EIS that the transmittal of final notice was mailed to the family. DHSS will notify the Service Coordination Unit to contact the family.</li> <li>• The Service Coordinator will contact the family to discuss the reason(s) for non-payment and, as appropriate, determine a need to review, and revise the IFSP and/or family cost participation form.</li> <li>• If the service coordinator can not contact the family or determine a need to change the IFSP or family cost participation payment, the service coordinator will notify the EIP and family that services requiring a family cost share are not to continue until payments in arrears are satisfied by the family.</li> <li>• The family will be eligible to continue to receive the functions and services required to be provided at public expense including service coordination.</li> </ul>

**CANCELLATION OF  
SCHEDULED EIP  
SERVICES**

In addition to sharing in the cost of services, families have a responsibility to be available for scheduled services. Each member of the team must be respected and valued for the time dedicated in serving the child and family.

**Family Responsibilities:**

- If a family can not be available for a scheduled service, they must provide the EIP with at least a **24 hour** notice of cancellation unless prevented by an emergency.
- If the family provides less than a 24 notice of cancellation of a scheduled service or, with the exception of an emergency situation, fails to be available for a scheduled service, the actual cost of service will be considered in the family cost share payment for that month. The actual cost of service will not exceed the family's monthly cost share documented on the Family Cost Participation Form
- The family should contact the EIP and confirm their availability for the next scheduled service or identify a need to review the current IFSP.

**EIP Responsibilities:**

- EIP providers must provide families with an annual calendar that identifies agency closings including, but not limited to, holidays and in-service trainings.
- EIP providers are to establish procedures for confirming scheduled or cancelled services with families.
- If an EIP can not be available for a scheduled service, they must provide the family with at least a 24 hour notice of cancellation unless prevented by an emergency and make a reasonable attempt to re-schedule the service.
- If the family fails to be present when the EIP provider arrives for a scheduled service, the EIP will record the service as a "no show" and document reasonable attempts to contact the family prior to the next scheduled service to identify the reason for the "no show" and confirm the next scheduled service.
- If the EIP provider is unsuccessful in contacting the family they will notify the family's service coordinator to follow-up with the family and suspend services until the service coordinator notifies them to resume the scheduled service or participate in an IFSP review.
- Prior to resuming a scheduled service, the EIP will contact the family to confirm the next scheduled service.

**Service Coordinator Responsibilities:**

- The Service Coordinator will inform the family of the policy and procedures for canceling scheduled services.
- Follow-up with the family when notified by the EIP provider that a family was a "no show" for a scheduled service and reasonable attempts to contact the family were unsuccessful.
- Documentation of attempts to contact the family including, but not limited to telephone, letters, e-mails or home visits.
- If contact with the family is established, the service coordinator will identify the reason(s) for the "no show" and determine any need to review the IFSP or financial cost participation with the family.
- After contact is made with the family, notify the EIP provider to resume the scheduled service, participate in an IFSP review or if the family situation has changed close the family from the EIP provider caseload.



<b>ADMINISTRATIVE REVIEW</b>	<p>The family must be informed of their rights and procedures for accessing procedural safeguards dispute resolution options under the early intervention system. The following procedures are available to assist families in resolving concerns and disputes:</p> <ul style="list-style-type: none"> <li>Families are encouraged to first contact their Service Coordinator to request, as appropriate, an IFSP meeting to review and consider any IFSP changes or address concerns about services.</li> <li>The parent may submit a request to DHSS-EIS for review of the monthly cost share payment to the address below. This should be submitted within fifteen (15) days from the date the notification of the family cost participation payment amount was received by the parent. The request for administrative review should be a written statement that includes the specific reasons the family cost participation payment amount should be reconsidered.</li> <li>Families that disagree with any action or decision related to the family cost share payment may: <ol style="list-style-type: none"> <li>Submit for DHSS administrative review to: EIS Financial Officer Department of Health and Senior Services Early Intervention System P.O. Box 364 Trenton, NJ 08625-0364</li> <li>Submit a request for Mediation, a Due Process Hearing, or administrative complaint through the Part C procedures to: Procedural Safeguards Office Department of Health and Senior Services Early Intervention System P.O. Box 364 Trenton, NJ 08625-0364</li> </ol> </li> </ul>
<b>DEFINITIONS</b>	<p><b>Ability to pay:</b> The financial capacity that a family has to pay for services based on the Federal Poverty Level Chart (Attachment A).</p> <p><b>Administering Entity:</b> The New Jersey Department of Health and Senior Services (NJ DHSS) is the lead agency responsible for the general administration and supervision of the Family Cost Participation System.</p> <p><b>Administrative Review:</b> Upon written request, the DHSS-EIS will review the financial circumstances involved in determining a family's ability to pay.</p> <p><b>Arrearage/<u>Arrears</u>:</b> The total family cost share payment amount past due.</p> <p><b>Caretaker Relative:</b> A relative, either by blood or by law, who lives with the child and exercises parental responsibility (care and control) in the absence of the child's parent. Examples include but are not limited to Grandparents, Aunts, Uncles, Cousins, Step-Parents and Adult Siblings.</p> <p><b>Central Management Office:</b> The DHSS designated agency responsible for billing and collecting the family cost share payment from the family.</p> <p><b>Cost share payment amount:</b> The dollar amount that a family is charged monthly. The family cost share payment is determined based on adjusted gross income and family size, less deductions approved through the EIS Application for Income Adjustment process.</p> <p><b>Cost Participation Plan:</b> A plan that imposes family cost share payments for early intervention direct services based on income and family size.</p>

**DEFINITIONS**  
(CONTINUED)

**Countable Income:** The family's annual Total Gross Income relevant to the size of household after allowable medical and personal care needs expenses have been subtracted.

**Emergency Cancellations:** Emergency cancellations are unforeseen situations which do not allow the parent/guardian sufficient time to notify the provider. (i.e. hospitalizations, sudden illness).

**Explanation of Benefits (EOB) Document:** A summary generated by the Central Management Office (CMO) that details delivered services. This document will identify any current family cost share payment amount due and any arrearage accumulated.

**Extenuating Circumstances:** Situations or circumstances that are unusual or out of the ordinary that would allow a family to be given special consideration.

**Failure to Pay:** When a family neglects to pay the cost share payment due.

**Federal Poverty Level (FPL):** FPL (poverty guidelines) is a simplified version of the Federal Government's statistical poverty thresholds used by the Census Bureau to prepare its statistical estimates of the number of persons and families in poverty. The guidelines are issued each year in the Federal Register by the Federal Department of Health and Human Services (HHS). The FPL is used for administrative purposes to determine financial eligibility for certain federal and state programs.

**Federal Poverty Level Chart:** The instrument used to determine the family's level of income based on a dollar amount and family size.

**Maximum Monthly Family Cost Share Amount:** The maximum amount a family may be billed in a one (1) month period.

**Medical Expenses:** Out-of-pocket medical expenses in which the family will not be reimbursed that relate to the health or medical needs of a family member.

**NJEIS Family Cost Participation Form:** A form used by service coordinators to document family income and financial information. This form will be completed, at least annually.

**Personal Care Needs Expenses:** Out-of-pocket expenses in which the family will not be reimbursed that relate to the health or medical needs of a family member.

**Procedural Safeguards:** Legal protections available to children and their parents to protect their rights in dealing with agencies and providers of early intervention services. Legal protections include parental consent, protection in evaluation procedures, opportunity for parents to examine, correct and supplement records, prior notice provisions, surrogate parent identification when necessary, due process procedures and confidentiality of records.

**Significant Change in Circumstances:** A change that influences or has an effect on the child/family's circumstances during the year of services that could result in a reevaluation of the family cost share payment amount.

**Total Adjusted Gross Income:** Total family income, exclusive of deductions. Examples include but are not limited to: wages, salaries, tips, business income, interest, dividends, capital gains, IRA distributions, pensions, annuities, royalties, partnerships, trusts, rental income, S corporations, farm income, alimony, child support, Social Security Income, unemployment compensation, disability compensation, and any other income listed on the federal 1040 Income Tax return.